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Attorney for Debtors

IN THE UNITED STATES BANKRUPTCY COURT FOR

THE DISTRICT OF ARIZONA, PHOENIX DIVISION

In Re:	Chapter 13		
CATHERINE ANN WILLIAMSON,	Case No. 2:15-bk-15653		
Debtor.	2:16-bk-00788		
In Re:	AMENDED SCHEDULES A/B, C, I AND J		
ROBERT LANCASTER WILLIAMSON, III.,	(Jointly Administered)		
Debtor.			
This pleading applies to the case or cases a noted above.			

Fill in this information to identify your case and this filing:							
Debtor 1	CATHERINE AND	CATHERINE ANNE WILLIAMSON					
	First Name	Middle Name	Last Name				
Debtor 2	ROBERT LANCA	STER WILLIAMSON, III					
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF ARIZONA					
Case number	15-15653; 16-00788						

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 1.1 2272 S. McCLELLAND PLACE Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the Chandler ΑZ 85286-0000 ☐ Land entire property? portion you own? City ZIP Code ■ Investment property \$700,293.00 \$700,293.00 State ☐ Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or Who has an interest in the property? Check one a life estate), if known. Fee Simple ☐ Debtor 1 only Maricopa ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

Official Form 106A/B Schedule A/B: Property page 2

Debtor 2 only

(see instructions)

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this is community property

90,000

Year:

2003

Approximate mileage:

GOOD CONDITION

Chandler AZ 85286

MCCLELLAND PLACE,

Location: 2272 S.

Other information:

Desc

\$8,119.00

Current value of the

portion you own?

Current value of the

\$8,119.00

entire property?

	ebtor 1 ebtor 2		ANNE WILLIAMSON NCASTER WILLIAMSON, III	Case number (if known)	15-15653; 16-00788
			or homes, ATVs and other recreational vehicles, other vertices, personal watercraft, fishing vessels, snowmobiles, respectively.		
5			the portion you own for all of your entries from Part 2, in add for Part 2. Write that number here		\$20,272.00
			nal and Household Items egal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example ☐ No	old goods and for es: Major appliand Describe	urnishings ces, furniture, linens, china, kitchenware		
			KITCHEN TABLE AND CHAIRS 100.00; DINING R CHAIRS 200.00; 3 COUCHES 1,500.00; 4 LIVING 400.00; 2 LIVING ROOM RUGS 200.00; COFFEE D PICTURES, PAINTINGS AND/OR FAMILY PORTE BEDS 900.00; 6 NIGHTSTANDS, 3 DRESSERS, 6 LAMPS 350.00; 16 TELEVISIONS 900.00; STERE ALARM CLOCK 10.00; STOVE 100.00; REFRIGEI WASHING MACHINE AND DRYER 250.00; VACU 20.00; 2 COMPUTERS 100.00; CAMERA 150.00; 0 FAX/PRINTER 300.00; OTHER MISCELLANEOUS GOODS AND FUNISHINGS 2,250.00	ROOM CHAIRS TABLE 25.00; 9 RAITS 4,500.00; 5 BEDROOM O 200.00; RADIO RATOR 250.00; UM CLEANER COMPUTER DESK, S HOUSEHOLD	\$42.705.00
7.	Electron Example	es: Televisions ar	nd radios; audio, video, stereo, and digital equipment; comprehens, cameras, media players, games		\$12,705.00 collections; electronic devices
	_	Describe			
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, ons, memorabilia, collectibles	, or other art objects; stamp, coin	, or baseball card collections;
9.	Example No	ent for sports ar es: Sports, photo musical instru Describe	graphic, exercise, and other hobby equipment; bicycles, poc	ol tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
			TENNIS RACKET Location: 2272 S. MCCLELLAND PLACE, Chand	ler AZ 85286	\$30.00
10.	■ No		s, shotguns, ammunition, and related equipment		

Debtor 1 Debtor 2	CATHERINE ANNE ROBERT LANCAST	WILLIAMSON ER WILLIAMSON, III	Case	e number (if known)	15-15653; 16-00788
11. Clothe <i>Exam</i> µ ☐ No	s oles: Everyday clothes, fur	rs, leather coats, designer	wear, shoes, accessories		
Yes.	Describe				
	CLOT Locat		_AND PLACE, Chandler AZ 85286	5	\$1,000.00
□ No		stume jewelry, engageme	nt rings, wedding rings, heirloom jewelry	v, watches, gems, g	old, silver
	800.00); RING, NECKLACES	DING BANDS 1,200.00; BRACEL , EARINGS \$1,500.00 LAND PLACE, Chandler AZ 85280		\$8,400.00
Exam _l ■ No	rm animals bles: Dogs, cats, birds, ho	rses			
■ No	her personal and house Give specific information		lready list, including any health aids	you did not list	
			including any entries for pages you	have attached	\$22,135.00
	scribe Your Financial Asset				
Do you ow	vn or have any legal or e	quitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No [′]	oles: Money you have in y	, ,	n a safe deposit box, and on hand wher	n you file your petitic	on
				Cash	\$1,040.00
Examp	institutions. If you ha		certificates of deposit; shares in credit the same institution, list each.	unions, brokerage h	ouses, and other similar
■ Yes		CHECKING,			
	17.1.	ACCOUNT NUMBER ENDING IN 4758	WELLS FARGO BANK		\$112.69
		CHECKING; ACCOUNT			
	17.2.	NUMBER ENDING IN 5713	NEIGHBORHOOD CREDIT UNIC	DN	\$0.00

Debtor 1 CATHERINE ANNE WILLIAMSON ROBERT LANCASTER WILLIAMSON, III			N, III	Case number (if known) 15-15653; 16-00788			
		17.3.	Checking	TD BANK; AC 5536	COUNT NUMBER ENDIG	N IN	\$89.10
		17.4.	Savings		OOLS FEDERAL CREDIT DUNT NUMBER ENDING II	N 3410	\$40.10
		17.5.	Savings	DESERT SCH	OOLS FEDERAL CREDIT	UNION	\$95.87
18.				rokerage firms, money m	arket accounts		
	■ No □ Yes		Institution or issuer	r namo:			
19.		stock and			rated businesses, including a	n interes	t in an LLC, partnership, and
	Yes. Give specific		about them me of entity:		% of owners	nip:	
		RN	W III, INC		100	%	Unknown
		VIC	CKI'S VODKA LL	.c	66.66	%	Unknown
21.	 Yes. Give specific in the specific i	Issi on account in IRA, ERIS ount separat	uer name: t s SA, Keogh, 401(k),	403(b), thrift savings acc	counts, or other pension or profi	t-sharing	plans
		IRA	or account.	ETRADE			\$11,009.19
				LINAL			
		401(l	κ)	FIDELITY INV	ESTMENTS		\$406.33
		401(I	()	ETRADE			\$5,505.00
	Examples: Agreemen ■ No □ Yes	sed deposit nts with land	ts you have made s dlords, prepaid rent,				nies, or others
24.		ntion IRA, i	n an account in a c	qualified ABLE progran	n, or under a qualified state t	uition pro	gram.

Debtor 1 Debtor 2	_	RINE ANNE WILLIAMSON ΓLANCASTER WILLIAMSON, III	Case number (if known)	15-15653; 16-00788
□Ye	es	Institution name and description. Separately f	file the records of any interests.11 U.S.C. § 521(c):	
■ No) ·	or future interests in property (other than any ic information about them	rthing listed in line 1), and rights or powers exe	rcisable for your benefit
_Exa	amples: Interne	ts, trademarks, trade secrets, and other intell t domain names, websites, proceeds from royalti		
□ No ■ Ye	-	ic information about them		
		DOMAIN NAME AND TRADE	EMARKS	Unknown
Exa ■ No	a <i>mples:</i> Building o	ses, and other general intangibles g permits, exclusive licenses, cooperative associ	iation holdings, liquor licenses, professional license	es
Money	or property ov	ved to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	-	to you c information about them, including whether you	already filed the returns and the tax years	
Exa ■ No	, D	ue or lump sum alimony, spousal support, child s	support, maintenance, divorce settlement, property	settlement
Exa ■ No	amples: Unpaid benefit D	weene owes you wages, disability insurance payments, disability s; unpaid loans you made to someone else ic information	benefits, sick pay, vacation pay, workers' comper	sation, Social Security
	•		unt (HSA); credit, homeowner's, or renter's insuran	се
		nsurance company of each policy and list its valu Company name:	ie. Beneficiary:	Surrender or refund value:
		PHOENIX LIFE INSURANCE COMPANY; WHOLE LIFE	CATHERINE ANNE WILLIAMSON	\$8,000.00
If you som	ou are the bene neone has died	, , , ,	s died ife insurance policy, or are currently entitled to rece	vive property because
Exa ■ No	amples: Accider	ird parties, whether or not you have filed a lawnshits, employment disputes, insurance claims, or rach claim		

Debto Debto				Case number (if known)	15-15653; 16-00788
	ther contingent and unliquidated	claims of every nature, inc	luding counterclaims o	of the debtor and rights to	set off claims
	No Yes. Describe each claim				
_	res. Describe each daim				
		CIVIL CLAIMS FOR M WILLIAMSON, III, VICI GUNVALSON AND DA 2:13-cv01019-JAD-GW PENDING REGARDIN	KI'S VODKA v. VICT VID BROOKS AYER VF, 2:13-cv-02022-JA	ORIA L. RS;	Unknown
	ny financial assets you did not alr No	eady list			
	Yes. Give specific information				
	Add the dollar value of all of your for Part 4. Write that number here.	•		•	\$26,298.28
Part 5	Describe Any Business-Related Pro	perty You Own or Have an Int	erest In. List any real esta	te in Part 1.	
_	you own or have any legal or equitable No. Go to Part 6.	e interest in any business-rela	ated property?		
	Yes. Go to line 38.				
Part 6	Describe Any Farm- and Commercial If you own or have an interest in farmle		ou Own or Have an Interes	st In.	
_	o you own or have any legal or eq ■ No. Go to Part 7.	uitable interest in any farn	n- or commercial fishin	g-related property?	
	Yes. Go to line 47.				
Part 7	Describe All Property You Own	or Have an Interest in That Y	ou Did Not List Above		
E	o you have other property of any I Examples: Season tickets, country cli		et?		
	Yes. Give specific information				
54.	Add the dollar value of all of your	entries from Part 7. Write t	hat number here		\$0.00
Part 8	List the Totals of Each Part of the	is Form			
55. I	Part 1: Total real estate, line 2				\$752,843.00
56. I	Part 2: Total vehicles, line 5		\$20,272.00		
57. I	Part 3: Total personal and househ	old items, line 15	\$22,135.00		
58. I	Part 4: Total financial assets, line	36	\$26,298.28		
59. I	Part 5: Total business-related pro	perty, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-rela	ted property, line 52	\$0.00		
61. I	Part 7: Total other property not lis	ted, line 54	+ \$0.00		
62.	Total personal property. Add lines	56 through 61	\$68,705.28	Copy personal property to	otal \$68,705.28
63.	Total of all property on Schedule	VB . Add line 55 + line 62			\$821,548.28

Schedule A/B: Property Official Form 106A/B page 7

Debtor 1	CATHERINE ANNE WILLIAMSON					
	First Name	Middle Name	Last Name			
Debtor 2	ROBERT LANCAS	STER WILLIAMSON, III				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA				
Case number	15-15653; 16-00788					

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Int 1: Identify the Property You Claim as E	Exempt			
1.	Which set of exemptions are you claiming	? Check one only, ever	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbar	nkruptcy exemptions. 1	11 U.S	s.C. § 522(b)(3)	
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	5829 COPPERWOOD LANE #1129 Dallas, TX 75248 Dallas County	\$52,550.00		\$34,190.07	11 U.S.C. § 522(d)(1)
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
	2002 LEXUS SC430 CONVERTIBLE	\$12,153.00		\$3,675.00	11 U.S.C. § 522(d)(2)
	2DOOR 56,000 miles GOOD CONDITION Location: 2272 S. MCCLELLAND PLACE, Chandler AZ 85286 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2002 LEXUS SC430 CONVERTIBLE	\$12,153.00		\$8,478.00	11 U.S.C. § 522(d)(5)
	2DOOR 56,000 miles GOOD CONDITION Location: 2272 S. MCCLELLAND PLACE, Chandler AZ 85286 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2003 LEXUS GX470 SPORT UTILITY	\$8,119.00		\$3,675.00	11 U.S.C. § 522(d)(2)
	4DOOR 90,000 miles GOOD CONDITION Location: 2272 S. MCCLELLAND PLACE, Chandler AZ 85286 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Line from Schedule A/B: 17.2

NUMBER ENDIGN IN 5536

Line from Schedule A/B: 17.3

CREDIT UNION

Official Form 106C

CHECKING; ACCOUNT NUMBER

Checking: TD BANK; ACCOUNT

ENDING IN 5713: NEIGHBORHOOD

\$0.00

\$89.10

11 U.S.C. § 522(d)(5)

11 U.S.C. § 522(d)(5)

\$100.00

\$89.10

100% of fair market value, up to

100% of fair market value, up to any applicable statutory limit

any applicable statutory limit

Debtor 1 Debtor 2	CATHERINE ANNE WILLIAMSON ROBERT LANCASTER WILLIAMS			Case number (if known)	15-15653; 16-00788
	lescription of the property and line on lule A/B that lists this property	Current value of the portion you own	•		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	ngs: DESERT SCHOOLS ERAL CREDIT UNION; ACCOUNT	\$40.10		\$40.10	11 U.S.C. § 522(d)(5)
NUM	BER ENDING IN 3410 rom Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	ngs: DESERT SCHOOLS	\$95.87		\$95.87	11 U.S.C. § 522(d)(5)
Line fi	rom Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	
	ETRADE rom Schedule A/B: 21.1	\$11,009.19		100%	11 U.S.C. § 522(d)(10)(E)
Line	Line Ironi Scriedule Avb. 21.1			100% of fair market value, up to any applicable statutory limit	
-	x): FIDELITY INVESTMENTS	\$406.33		100%	11 U.S.C. § 522(d)(12)
Line	Line Holli Govedale 775. 2112			100% of fair market value, up to any applicable statutory limit	
	x): ETRADE rom Schedule A/B: 21.3	\$5,505.00		100%	11 U.S.C. § 522(d)(10)(E)
Line	om concado 772. 2 no			100% of fair market value, up to any applicable statutory limit	
_	AIN NAME AND TRADEMARKS	Unknown		\$2,300.00	11 U.S.C. § 522(d)(6)
Line	om <i>concada 772.</i> 20.1			100% of fair market value, up to any applicable statutory limit	
	ENIX LIFE INSURANCE PANY; WHOLE LIFE	\$8,000.00		\$12,250.00	11 U.S.C. § 522(d)(8)
Bene WILL	riciary: CATHERINE ANNE IAMSON rom Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	

☐ Yes

Best Case Bankruptcy

Debtor 1	CATHERINE ANN	E WILLIAMSON		
	First Name	Middle Name	Last Name	
Debtor 2	ROBERT LANCAS	STER WILLIAMSON, III		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number	15-15653; 16-00788			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number,	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					_
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in this infor	mation to identify your	case:			
Debtor 1	CATHERINE ANN	E WILLIAMSON			
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	STER WILLIAMSON, III Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF ARIZONA			
O	45 45050 40 00700			_	
Case number (if known)	15-15653; 16-00788				■ Check if this is an
					amended filing
\#:a:a! _a	was 400LL				
Official Fo		alat aa			
schedule	H: Your Cod	<u>ebtors</u>			12/15
eople are filing ill it out, and nu	together, both are equ imber the entries in the	ally responsible for supplyi	ng correct informat	ion. If more space is n	ate as possible. If two married eeded, copy the Additional Page, of any Additional Pages, write
1. Do you h	ave any codebtors? (If	you are filing a joint case, do	not list either spouse	as a codebtor.	
■ No					
☐ Yes					
□ No. Go to	line 3.	Nevada, New Mexico, Puerto		,	
□ No					
■ Ye	es.				
	In which community state	e or territory did you live?	-NONE-	. Fill in the name ar	nd current address of that person.
-	Name of your spouse, former sp Number, Street, City, State & Zip	ouse, or legal equivalent Code			
in line 2 aga	ain as a codebtor only i), Schedule E/F (Official	f that person is a guarantor	or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	nn 1: Your codebtor Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	e.
Name				☐ Schedule E/F, I	
				☐ Schedule G, lin	e
Number	r Street	0	710.6	_	
City		State	ZIP Code		
				Пол	
3.2 Name				_ ☐ Schedule D, line	

Number

City

Schedule H: Your Codebtors

 \square Schedule E/F, line ☐ Schedule G, line

Street

State

ZIP Code

Fill in this information to identify	your case:	
Debtor 1 CATHE	ERINE ANNE WILLIAMSON	
Debtor 2 (Spouse, if filing)	RT LANCASTER WILLIAMSON, III	
United States Bankruptcy Court	for the: DISTRICT OF ARIZONA	
Case number15-15653; 1	16-00788	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter
		13 income as of the following date:
Official Form 106l		MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	☐ Employed	■ Employed
attach a separate page with information about additional		■ Not employed	☐ Not employed
employers.	Occupation	HOUSEWIFE	SELF-EMPLOYED
Include part-time, seasonal, or self-employed work.	Employer's name		
Occupation may include student or homemaker, if it applies.	Employer's address		
	How long employed to	here?	

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 0.00

Case number (if known) 15-15653; 16-00788

				ı	For D	ebtor 1			r Debtor n-filing s		
	Copy	y line 4 here	4.	-	\$	0	.00	\$	II-IIIIIg s	0.0	
5.	List	all payroll deductions:						_			
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	0	.00	\$		0.0	0
	5b.	Mandatory contributions for retirement plans	5b.		; \$.00	\$		0.0	
	5c.	Voluntary contributions for retirement plans	5c.	9	\$.00	\$		0.0	_
	5d.	Required repayments of retirement fund loans	5d.		\$	0	.00	\$		0.0	<u> </u>
	5e.	Insurance	5e.		\$	0	.00	\$		0.0	0
	5f.	Domestic support obligations	5f.	9	\$	0	.00	\$		0.0	<u> </u>
	5g.	Union dues	5g.		\$	0	.00	\$		0.0	0
	5h.	Other deductions. Specify:	5h	+ 5	\$	0	.00	+ \$		0.0	0
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	S	0	.00	\$		0.0	0
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	S	0	.00	\$_		0.0	0_
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$	0	.00	\$	3	031.2	5
	8b.	Interest and dividends	8b.		š ——		.00	\$-	J,	0.0	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		·		.00	\$		0.0	<u>-</u>
	8d.	Unemployment compensation	8d.		\$.00	\$		0.0	_
	8e.	Social Security	8e.		\$.00	\$		0.0	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.		\$.00	\$_		0.0	
	8g.	Pension or retirement income	8g.		\$.00	\$_		0.0	
	8h.	Other monthly income. Specify:	_ 8h	+ 3	\$	0	.00	+ \$_		0.0	<u>D</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0	.00	\$_	3	3,031.2	25
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	\$		0.00	+ \$_	3	,031.25	= \$	3,031.25
11.	11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00										
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines							e. 12.	\$	3,031.25
										Comb	ined nly income
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?							mont	ny moonie
		Yes. Explain: DEBTORS SELF EMPLOYMENT INCOME VARIES	MO	NT	н вү	MONTI	Н				

EIII	in this inform	nation to identify y	our case:						
Deb	tor 1	CATHERINE	: ANNE W	ILLIAMSON			k if this is: An amended filing		
Deb	tor 2	ROBERTIA	NCASTE	R WILLIAMSON, III		_	g .	ving postpetition chapter	
(Spc	ouse, if filing)						13 expenses as of		
Unit	ed States Ban	kruptcy Court for the	: DISTRI	CT OF ARIZONA		=	MM / DD / YYYY		
Cas	e number	15-15653; 16-00)788						
(If kı	nown)								
Of	fficial F	orm 106J							
		e J: Your	Exper	202				12/	15
Be a	as complete ormation. If	e and accurate as	s possible. eeded, atta	If two married people ar ch another sheet to this				or supplying correct	
Par 1.	t 1: Des	cribe Your House	ehold						
١.	□ No. Go								
		oes Debtor 2 live	in a separ	ate household?					
	_	No							
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debt	or 2.		
2.	Do you bo	ve dependents?	■ N.						
۷.	-	•	_	Fill and this information for	Daman danska nalasi		Dan an dan tia	Dana danan dant	
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not stat	e the						□ No	
	dependent	s names.						☐ Yes	
								□ No	
								☐ Yes ☐ No	
								☐ Yes	
								□ No	
								☐ Yes	
3.		xpenses include	than	No					
	•	of people other t nd your depende		Yes					
Par	t 2: Esti	mate Your Ongoi	ina Manthi	y Evnoncos					
Est	imate your	expenses as of y f a date after the	our bankru	ptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the fol	orm as a su J, check th	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the	<u> </u>
the		ch assistance an		government assistance in Sluded it on <i>Schedule I: Y</i>			Your expe	enses	
4.	The rental	·		ses for your residence. In	nclude first mortgage	÷ 4. \$		1,186.00	
	. ,	•	ground 0						
		ıded in line 4:							
		l estate taxes	o orrent	'a inqurance		4a. \$		0.00	
		erty, homeowner' ne maintenance, re				4b. \$ 4c. \$		0.00	
		neowner's associa				4d. \$		0.00	
5.				our residence, such as ho	me equity loans	5. \$	- 	0.00	

Debtor 1 Debtor 2	CATHERINE ANNE WILLIAMSON ROBERT LANCASTER WILLIAMSON, III	Case number (if known)	15-15653; 16-00788	
	lities:			
6a.	, , , , , , , , , , , , , , , , , , ,	6a. \$	0.00	
6b.	,, 9	6b. \$	0.00	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	0.00	
6d.	·	6d. \$	0.00	
	od and housekeeping supplies	7. \$	0.00	
_	ildcare and children's education costs	8. \$	0.00	
	othing, laundry, and dry cleaning	9. \$	0.00	
	rsonal care products and services	10. \$	0.00	
	dical and dental expenses	11. \$	0.00	
	Insportation. Include gas, maintenance, bus or train fare.	12. \$	0.00	
	not include car payments.	· —		
	tertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00	
	aritable contributions and religious donations	14. \$	0.00	
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a. \$	0.00	
	b. Health insurance	15b. \$	0.00	
	c. Vehicle insurance	15c. \$	0.00	
	d. Other insurance. Specify:	15d. \$	0.00	
. Tax	kes. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16. \$		
	•	10. φ	0.00	
	tallment or lease payments: a. Car payments for Vehicle 1	17a. \$	0.00	
	c. Car payments for Vehicle 2	17b. \$	0.00	
	c. Other. Specify:	17c. \$	0.00	
	d. Other. Specify:	17d. \$	0.00	
	ur payments of alimony, maintenance, and support that you did not report as		0.00	
de	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00	
	ner payments you make to support others who do not live with you.	\$	0.00	
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on School Markages on other property		0.00	
	a. Mortgages on other property	20a. \$	0.00	
	o. Real estate taxes	20b. \$	0.00	
	c. Property, homeowner's, or renter's insurance	20c. \$	0.00	
	d. Maintenance, repair, and upkeep expenses	20d. \$	0.00	
	e. Homeowner's association or condominium dues	20e. \$	0.00	
. Oth	ner: Specify:	21. +\$	0.00	
. Ca	culate your monthly expenses			
228	a. Add lines 4 through 21.	\$	1,186.00	
22k	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$		
220	c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,186.00	
. Ca	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	3,031.25	
	Copy your monthly expenses from line 22c above.	23b\$	1,186.00	
23/	c. Subtract your monthly expenses from your monthly income.			
230	The result is your <i>monthly net income</i> .	23c. \$	1,845.25	

modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: DEBTORS' MORTGAGE IS PROJECTED PENDING THE CONCLUSION OF THE MORTGAGE LOAN MODIFICATION. ADDITONAL REGULAR MONTHLY EXPENSES ARE PAID THROUGH THE BUSINESS. DEBTORS WILL FILE THE OPERATING STATEMENTS TO REFLECT THOSE EXPENSES PAID

United States Bankruptcy Court District of Arizona

-	CATHERINE ANNE WILLIAMSON		a	45 45050 40 00700	
In re	ROBERT LANCASTER WILLIAMSON, III		Case No.	15-15653; 16-00788	
		Debtor(s)	Chapter	13	

AMENDED DECLARATION CONCERNING DEBTOR'S SCHEDULES

	DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR						
I declare under penalty of perjury that I have read the foregoing document(s), consisting of18 page(s and that they are true and correct to the best of my knowledge, information, and belief.							
Date	March 28, 2017	Signature	/s/ CATHERINE ANNE WILLIAMSON CATHERINE ANNE WILLIAMSON Debtor				
Date	March 28, 2017	Signature	/s/ ROBERT LANCASTER WILLIAMSON, III ROBERT LANCASTER WILLIAMSON, III Joint Debtor				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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